

# **EXHIBIT “E”**

**FOR TAX YEAR 2019**  
AMERIWAY CORPORATION

Sara Sam CPA PC  
2424 E York Street 301C  
Philadelphia, PA 19125  
(215)667-8839

## Sara Sam CPA PC

2424 E York Street 301C  
Philadelphia, PA 19125  
sara@sarasamcpa.com

Phone: (215)667-8839 | Fax: (215)695-2376

February 13, 2020

AMERIWAY CORPORATION  
2424 E YORK ST, STE 223  
Philadelphia, PA 19125

AMERIWAY CORPORATION:

Enclosed is the 2019 Form 1120, U.S. Corporation Income **Tax** Return, prepared for AMERIWAY CORPORATION from the information provided. The return will be e-filed with the IRS once we receive a signed Form 8879-C, IRS e-file Signature Authorization for Form 1120.

The corporation's federal return reflects neither a refund nor a balance due.

Enclosed is the 2019 Pennsylvania Corporate **Tax** Report return, prepared for AMERIWAY CORPORATION from the information provided. This return will be e-filed with the Pennsylvania **taxing** authority.

The corporation's Pennsylvania Corporate **Tax** Report return reflects neither a refund nor a balance due.

Enclosed is the 2019 Philadelphia Business Income and Receipts **Tax** return, prepared for AMERIWAY CORPORATION from the information provided. This return will be e-filed with the Philadelphia **taxing** authority.

The corporation's Philadelphia Business Income and Receipts **Tax** return reflects a balance due of \$524.

Make this payment on or before April 15, 2020. If not paying electronically, mail this payment to the following address:  
Philadelphia Department of Revenue  
PO Box 1393  
Philadelphia, PA 19105-1393  
(Payable to City of Philadelphia)

The corporation's Philadelphia Business Income and Receipts **Tax** estimated payments have been prepared for the 2020 **tax** year. The corporation's Philadelphia Business Income and Receipts **Tax** estimate details by quarter are as follows:

1st Quarter : \$792 due on April 15, 2020

If not paying electronically, mail each payment separately, with the corresponding voucher, on or before the due date to the following address:

Philadelphia Department of Revenue  
PO Box 1393  
Philadelphia, PA 19105-1393  
(Payable to City of Philadelphia)

Thank you for the opportunity be of service. For further assistance with your **tax** return needs, contact our office at (215)667-8839.

Sincerely,

Sara Sam  
Sara Sam CPA PC



<b>Form 1120</b> Department of the Treasury Internal Revenue Service	<b>U.S. Corporation Income Tax Return</b> For calendar year 2019 or tax year beginning _____, 2019, ending _____, 20____ ▶ Go to <a href="http://www.irs.gov/Form1120">www.irs.gov/Form1120</a> for instructions and the latest information.	OMB No. 1545-0123 <b>2019</b>				
<b>A Check if:</b> <b>1a</b> Consolidated return (attach Form 851) <input type="checkbox"/> <b>b</b> Life/nonlife consolidated return <input type="checkbox"/> <b>2</b> Personal holding co. (attach Sch. PH) <input type="checkbox"/> <b>3</b> Personal service corp. (see instructions) <input type="checkbox"/> <b>4</b> Schedule M-3 attached <input type="checkbox"/>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;"><b>NAME</b></td> <td>AMERIWAY CORPORATION UNITED E-LOGISTICS CORPORATI</td> </tr> <tr> <td><b>TYPE OR PRINT</b></td> <td>Number, street, and room or suite no. If a P.O. box, see instructions <b>STE 223</b>  <b>2424 E YORK ST</b> City or town, state or province, country and ZIP or foreign postal code <b>Philadelphia PA 19125</b></td> </tr> </table>	<b>NAME</b>	AMERIWAY CORPORATION UNITED E-LOGISTICS CORPORATI	<b>TYPE OR PRINT</b>	Number, street, and room or suite no. If a P.O. box, see instructions <b>STE 223</b>  <b>2424 E YORK ST</b> City or town, state or province, country and ZIP or foreign postal code <b>Philadelphia PA 19125</b>	<b>B</b> Employer identification number <b>81-4134438</b> <b>C</b> Date incorporated <b>10-14-2016</b> <b>D</b> Total assets (see instructions) \$ <b>1,598</b>
<b>NAME</b>	AMERIWAY CORPORATION UNITED E-LOGISTICS CORPORATI					
<b>TYPE OR PRINT</b>	Number, street, and room or suite no. If a P.O. box, see instructions <b>STE 223</b>  <b>2424 E YORK ST</b> City or town, state or province, country and ZIP or foreign postal code <b>Philadelphia PA 19125</b>					
<b>E</b> Check if: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change						

<b>Income</b>	<b>1a</b> Gross receipts or sales <span style="float: right;"><b>1a</b> 659,905</span> <b>b</b> Returns and allowances <span style="float: right;"><b>1b</b></span> <b>c</b> Balance. Subtract line 1b from line 1a <span style="float: right;"><b>1c</b> 659,905</span> <b>2</b> Cost of goods sold (attach Form 1125-A) <span style="float: right;"><b>2</b></span> <b>3</b> Gross profit. Subtract line 2 from line 1c <span style="float: right;"><b>3</b> 659,905</span> <b>4</b> Dividends and inclusions (Schedule C, line 23) <span style="float: right;"><b>4</b></span> <b>5</b> Interest <span style="float: right;"><b>5</b></span> <b>6</b> Gross rents <span style="float: right;"><b>6</b></span> <b>7</b> Gross royalties <span style="float: right;"><b>7</b></span> <b>8</b> Capital gain net income (attach Schedule D (Form 1120)) <span style="float: right;"><b>8</b></span> <b>9</b> Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797) <span style="float: right;"><b>9</b></span> <b>10</b> Other income (see instructions - attach statement) <span style="float: right;"><b>10</b></span> <b>11 Total income.</b> Add lines 3 through 10 <span style="float: right;"><b>11</b> 659,905</span>	
<b>Deductions (See instructions for limitations on deductions.)</b>	<b>12</b> Compensation of officers (see instructions - attach Form 1125-E) <span style="float: right;"><b>12</b></span> <b>13</b> Salaries and wages (less employment credits) <span style="float: right;"><b>13</b></span> <b>14</b> Repairs and maintenance <span style="float: right;"><b>14</b></span> <b>15</b> Bad debts <span style="float: right;"><b>15</b></span> <b>16</b> Rents <span style="float: right;"><b>16</b></span> <b>17</b> Taxes and licenses <span style="float: right;"><b>17</b></span> <b>18</b> Interest (see instructions) <span style="float: right;"><b>18</b></span> <b>19</b> Charitable contributions <span style="float: right;"><b>19</b></span> <b>20</b> Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562) <span style="float: right;"><b>20</b></span> <b>21</b> Depletion <span style="float: right;"><b>21</b></span> <b>22</b> Advertising <span style="float: right;"><b>22</b></span> <b>23</b> Pension, profit-sharing, etc., plans <span style="float: right;"><b>23</b></span> <b>24</b> Employee benefit programs <span style="float: right;"><b>24</b></span> <b>25</b> Reserved for future use <span style="float: right;"><b>25</b></span> <b>26</b> Other deductions (attach statement) <span style="float: right;"><b>26</b> Statement #5 739,274</span> <b>27 Total deductions.</b> Add lines 12 through 26 <span style="float: right;"><b>27</b> 739,274</span> <b>28 Taxable income before net operating loss deduction and special deductions.</b> Subtract line 27 from line 11. <span style="float: right;"><b>28</b> (79,369)</span> <b>29a</b> Net operating loss deduction (see instructions) <span style="float: right;"><b>29a</b></span> <b>b</b> Special deductions (Schedule C, line 24) <span style="float: right;"><b>29b</b></span> <b>c</b> Add lines 29a and 29b <span style="float: right;"><b>29c</b></span>	
<b>Tax, Refundable Credits, &amp; Payments</b>	<b>30 Taxable income.</b> Subtract line 29c from line 28. See instructions. <span style="float: right;"><b>30</b> (79,369)</span> <b>31</b> Total tax (Schedule J, Part I, line 11) <span style="float: right;"><b>31</b> 0</span> <b>32</b> 2019 net 965 tax liability paid (Schedule J, Part II, line 12) <span style="float: right;"><b>32</b></span> <b>33</b> Total payments, credits, and section 965 net tax liability (Schedule J, Part III, line 23) <span style="float: right;"><b>33</b></span> <b>34</b> Estimated tax penalty. See instructions. Check if Form 2220 is attached <input type="checkbox"/> <span style="float: right;"><b>34</b></span> <b>35 Amount owed.</b> If line 33 is smaller than the total of lines 31, 32, and 34, enter amount owed. <span style="float: right;"><b>35</b></span> <b>36 Overpayment.</b> If line 33 is larger than the total of lines 31, 32, and 34, enter amount overpaid. <span style="float: right;"><b>36</b></span> <b>37</b> Enter amount from line 36 you want: <b>Credited to 2020 estimated tax</b> <input checked="" type="checkbox"/> <b>Refunded</b> <input type="checkbox"/> <span style="float: right;"><b>37</b></span>	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
<b>Sign Here</b>	<b>XIYAN ZHANG</b> Signature of officer	Date	<b>CEO</b> Title	May the IRS discuss this return with the preparer shown below? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>Sara Sam</b>	Preparer's signature <b>Sara Sam</b>	Date <b>02-13-2020</b>	Check <input type="checkbox"/> if PTIN self-employed <b>P01602029</b>
	Firm's name ▶ <b>Sara Sam CPA PC</b>	Firm's EIN ▶ <b>47-1500758</b>		
	Firm's address ▶ <b>2424 E York Street 301C Philadelphia PA 19125</b>	Phone no. <b>(215) 667-8839</b>		



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<b>Schedule C</b>		<b>Dividends, Inclusions, and Special Deductions</b> (see instructions)		(a) Dividends and inclusions	(b) %	(c) Special deductions (a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock) . . . . .				50	
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock) . . . . .				65	
3	Dividends on certain debt-financed stock of domestic and foreign corporations . . . . .				see instructions	
4	Dividends on certain preferred stock of less-than-20%-owned public utilities . . . . .				23.3	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities . . . . .				26.7	
6	Dividends from less-than-20%-owned foreign corporations and certain FSCs . . . . .				50	
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs . . . . .				65	
8	Dividends from wholly owned foreign subsidiaries . . . . .				100	
9	<b>Subtotal.</b> Add lines 1 through 8. See instructions for limitations . . . . .				see instructions	
10	Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958 . . . . .				100	
11	Dividends from affiliated group members . . . . .				100	
12	Dividends from certain FSCs . . . . .				100	
13	Foreign-source portion of dividends received from a specified 10%-owned foreign corporation (excluding hybrid dividends) (see instructions) . . . . .				100	
14	Dividends from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 (including any hybrid dividends) . . . . .					
15	Section 965(a) inclusion . . . . .				see instructions	
16a	Subpart F inclusions derived from the sale by a controlled foreign corporation (CFC) of the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) (see instructions) . . . . .				100	
b	Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s) 5471) (see instructions) . . . . .					
c	Other inclusions from CFCs under subpart F not included on line 15, 16a, 16b, or 17 (attach Form(s) 5471) (see instructions) . . . . .					
17	Global Intangible Low-Taxed Income (GILTI)(attach Form(s) 5471 and Form 8992) . . . . .					
18	Gross-up for foreign taxes deemed paid . . . . .					
19	IC-DISC and former DISC dividends not included on line 1, 2, or 3 . . . . .					
20	Other dividends . . . . .					
21	Deduction for dividends paid on certain preferred stock of public utilities . . . . .					
22	Section 250 deduction (attach Form 8993) . . . . .					
23	<b>Total dividends and inclusions.</b> Add column (a), lines 9 through 20. Enter here and on page 1, line 4 . . . . .					
24	<b>Total special deductions.</b> Add column (c), lines 9 through 22. Enter here and on page 1, line 29b . . . . . ▶					

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**Schedule J Tax Computation and Payment** (see instructions)**Part I - Tax Computation**

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions ▶ <input type="checkbox"/>		
2	Income <b>tax</b> . See instructions . . . . .	2	0
3	Base erosion minimum <b>tax</b> (attach Form 8991) . . . . .	3	
4	Add lines 2 and 3 . . . . .	4	0
5a	Foreign <b>tax</b> credit (attach Form 1118) . . . . .	5a	0
b	Credit from Form 8834 (see instructions) . . . . .	5b	
c	General business credit (attach Form 3800) . . . . .	5c	
d	Credit for prior year minimum <b>tax</b> (attach Form 8827) . . . . .	5d	
e	Bond credits from Form 8912 . . . . .	5e	
6	<b>Total credits.</b> Add lines 5a through 5e. . . . .	6	
7	Subtract line 6 from line 4 . . . . .	7	0
8	Personal holding company <b>tax</b> (attach Schedule PH (Form 1120)) . . . . .	8	0
9a	Recapture of investment credit (attach Form 4255) . . . . .	9a	
b	Recapture of low-income housing credit (attach Form 8611) . . . . .	9b	
c	Interest due under the look-back method - completed long-term contracts (attach Form 8697) . . . . .	9c	
d	Interest due under the look-back method - income forecast method (attach Form 8866) . . . . .	9d	
e	Alternative <b>tax</b> on qualifying shipping activities (attach Form 8902) . . . . .	9e	
f	Other (see instructions - attach statement) . . . . .	9f	
10	<b>Total.</b> Add lines 9a through 9f. . . . .	10	
11	<b>Total tax.</b> Add lines 7, 8, and 10. Enter here and on page 1, line 31. . . . .	11	0

**Part II - Section 965 Payments** (see instructions)

12	2019 net 965 <b>tax</b> liability paid from Form 965-B, Part II, column (k), line 3. Enter here and on page 1, line 32 . . . . .	12	
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**Part III - Payments, Refundable Credits, and Section 965 Net Tax Liability**

13	2018 overpayment credited to 2019 . . . . .	13	
14	2019 estimated <b>tax</b> payments . . . . .	14	
15	2019 refund applied for on Form 4466 . . . . .	15	( )
16	Combine lines 13, 14, and 15 . . . . .	16	
17	<b>Tax</b> deposited with Form 7004 . . . . .	17	
18	Withholding (see instructions) . . . . .	18	
19	<b>Total payments.</b> Add lines 16, 17, and 18. . . . .	19	
20	Refundable credits from:		
a	Form 2439 . . . . .	20a	
b	Form 4136 . . . . .	20b	
c	Form 8827, line 5c . . . . .	20c	
d	Other (attach statement - see instructions) . . . . .	20d	
21	<b>Total credits.</b> Add lines 20a through 20d. . . . .	21	
22	2019 net 965 <b>tax</b> liability from Form 965-B, Part I, column (d), line 3. See instructions. . . . .	22	
23	<b>Total payments, credits, and section 965 net tax liability</b> Add lines 19, 21, and 22. Enter here and on page 1, line 33 . . . . .	23	

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**Schedule K** Other Information (see instructions)

1	Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶	Yes	No
2	See the instructions and enter the:		
a	Business activity code no. ▶ 488990		
b	Business activity ▶ LOGISTICS		
c	Product or service ▶ SERVICE		
3	Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? . . . . . If "Yes," enter name and EIN of the parent corporation ▶		X
4	At the end of the tax year:		
a	Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G) . . . . .		X
b	Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G) . . . . .	X	
5	At the end of the tax year, did the corporation:		
a	Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851, Affiliations Schedule? For rules of constructive ownership, see instructions. . . . . If "Yes," complete (i) through (iv) below.		X
(i) Name of Corporation		(ii) Employer Identification Number (if any)	(iii) Country of Incorporation
			(iv) Percentage Owned in Voting Stock
b	Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. . . . . If "Yes," complete (i) through (iv) below.		X
(i) Name of Entity		(ii) Employer Identification Number (if any)	(iii) Country of Organization
			(iv) Maximum Percentage Owned in Profit, Loss, or Capital
6	During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? See sections 301 and 316 . . . . . If "Yes," file Form 5452, Corporate Report of Nondividend Distributions. See the instructions for Form 5452. If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary.		X
7	At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of the total voting power of all classes of the corporation's stock entitled to vote or at least 25% of the total value of all classes of the corporation's stock? . . . . . For rules of attribution, see section 318. If "Yes," enter: (a) Percentage owned ▶ and (b) Owner's country ▶ (c) The corporation may have to file Form 5472, Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶ 0		X
8	Check this box if the corporation issued publicly offered debt instruments with original issue discount . . . . . ▶ <input type="checkbox"/> If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.		
9	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		
10	Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶ 4		
11	If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here (see instructions) . . . . ▶ <input checked="" type="checkbox"/> If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.		
12	Enter the available NOL carryover from prior tax years (do not reduce it by any deduction reported on page 1, line 29a.) . . . . . ▶ \$ 268,211		

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AMERIWAY - 0077601



**Schedule K** Other Information (continued from page 4)

	Yes	No
13 Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the <b>tax</b> year and its total assets at the end of the <b>tax</b> year less than \$250,000? . . . . .		<b>X</b>
If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the <b>tax</b> year ▶ \$ . . . . .		
14 Is the corporation required to file Schedule UTP (Form 1120), Uncertain <b>Tax</b> Position Statement? See instructions . . . . .		<b>X</b>
If "Yes," complete and attach Schedule UTP.		
15a Did the corporation make any payments in 2019 that would require it to file Form(s) 1099? . . . . .	<b>X</b>	
b If "Yes," did or will the corporation file required Form(s) 1099? . . . . .	<b>X</b>	
16 During this <b>tax</b> year, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock? . . . . .		<b>X</b>
17 During or subsequent to this <b>tax</b> year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a <b>taxable</b> , non- <b>taxable</b> , or <b>tax</b> deferred transaction? . . . . .		<b>X</b>
18 Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million? . . . . .		<b>X</b>
19 During the corporation's <b>tax</b> year, did the corporation make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code? . . . . .		<b>X</b>
20 Is the corporation operating on a cooperative basis? . . . . .		<b>X</b>
21 During the <b>tax</b> year, did the corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions . . . . .		<b>X</b>
If "Yes," enter the total amount of the disallowed deductions ▶ \$ . . . . .		
22 Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding <b>tax</b> years? (See sections 59A(e)(2) and (3)) . . . . .		<b>X</b>
If "Yes," complete and attach Form 8991.		
23 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the <b>tax</b> year? See instructions . . . . .		<b>X</b>
24 Does the corporation satisfy one or more of the following conditions? See instructions. . . . .		<b>X</b>
a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 <b>tax</b> years preceding the current <b>tax</b> year are more than \$26 million and the corporation has business interest expense.		
c The corporation is a <b>tax</b> shelter and the corporation has business interest expense.		
If "Yes," to any, complete and attach Form 8990.		
25 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? . . . . .		<b>X</b>
If "Yes," enter amount from Form 8996, line 14 . . . . . ▶ \$ . . . . .		

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Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash . . . . .		52,531		1,598
2a	Trade notes and accounts receivable . . . . .				
b	Less allowance for bad debts . . . . .	( )		( )	
3	Inventories . . . . .				
4	U.S. government obligations . . . . .				
5	Tax-exempt securities (see instructions) . . . . .				
6	Other current assets (attach statement) . . . . .				
7	Loans to shareholders . . . . .				
8	Mortgage and real estate loans . . . . .				
9	Other investments (attach statement) . . . . .				
10a	Buildings and other depreciable assets . . . . .				
b	Less accumulated depreciation . . . . .	( )		( )	
11a	Depletable assets . . . . .				
b	Less accumulated depletion . . . . .	( )		( )	
12	Land (net of any amortization) . . . . .				
13a	Intangible assets (amortizable only) . . . . .				
b	Less accumulated amortization . . . . .	( )		( )	
14	Other assets (attach statement) . . . . .				
15	Total assets . . . . .		52,531		1,598
<b>Liabilities and Shareholders' Equity</b>					
16	Accounts payable . . . . .		38,520		
17	Mortgages, notes, bonds payable in less than 1 year . . . . .				
18	Other current liabilities (attach statement) . . . . .				
19	Loans from shareholders . . . . .				
20	Mortgages, notes, bonds payable in 1 year or more . . . . .				
21	Other liabilities (attach statement) . . . . .				
22	Capital stock: a Preferred stock . . . . .				
	b Common stock . . . . .	100	100	100	100
23	Additional paid-in capital . . . . .		282,122		349,122
24	Retained earnings-Appropriated (attach statement) . . . . .				
25	Retained earnings-Unappropriated . . . . .		(268,211)		(347,624)
26	Adjustments to shareholders' equity (attach statement) . . . . .				
27	Less cost of treasury stock . . . . .	( )		( )	
28	Total liabilities and shareholders' equity . . . . .		52,531		1,598

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return**

Note: The corporation may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books . . . . .	(79,413)	7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books . . . . .			Tax-exempt interest \$	
3	Excess of capital losses over capital gains . . . . .				
4	Income subject to tax not recorded on books this year (itemize):				
5	Expenses recorded on books this year not deducted on this return (itemize):		8	Deductions on this return not charged against book income this year (itemize):	
a	Depreciation . . . . . \$		a	Depreciation . . . . . \$	
b	Charitable contributions . . . . . \$		b	Charitable contributions . . . . . \$	
c	Travel and entertainment . . . . . \$ 44				
		44	9	Add lines 7 and 8 . . . . .	
6	Add lines 1 through 5 . . . . .	(79,369)	10	Income (page 1, line 28)-line 6 less line 9	(79,369)

**Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)**

1	Balance at beginning of year . . . . .	(268,211)	5	Distributions: a Cash . . . . .	
2	Net income (loss) per books . . . . .	(79,413)		b Stock . . . . .	
3	Other increases (itemize):			c Property . . . . .	
			6	Other decreases (itemize):	
4	Add lines 1, 2, and 3 . . . . .	(347,624)	7	Add lines 5 and 6 . . . . .	
			8	Balance at end of year (line 4 less line 7)	(347,624)

EEA

HIGHLY CONFIDENTIAL - ATTORNEY'S EYES ONLY

AMERIWAY - 0077602 Form 1120 (2019)



**SCHEDULE G  
(Form 1120)**(Rev. December 2011)  
Department of the Treasury  
Internal Revenue Service  
Name**Information on Certain Persons Owning the  
Corporation's Voting Stock**

- Attach to Form 1120.  
► See instructions.

OMB No. 1545-0123

Employer identification number (EIN)

**AMERIWAY CORPORATION****81-4134438**

**Part I** **Certain Entities Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4a). Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Percentage Owned in Voting Stock

**Part II** **Certain Individuals and Estates Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4b). Complete columns (i) through (iv) below for any individual or estate that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Percentage Owned in Voting Stock
<b>Xiaohong liu</b>	<b>FOREIGNUS</b>	<b>CH</b>	<b>22.5</b>
<b>Huan Yu</b>	<b>FOREIGNUS</b>	<b>CH</b>	<b>20</b>
<b>Xiyan Zhang</b>	<b>510-11-5448</b>	<b>US</b>	<b>44.5</b>



**Federal Supporting Statements****2019 PG01**

Name(s) as shown on return

Tax ID Number

AMERIWAY CORPORATION

81-4134438

Form 1120 - Line 26 - Other Deductions

Statement #5

Description	Amount
Bank charges	848
Freight	700,965
Independent Contractor	33,150
Meals 50% limit	44
Permits and fees	2,351
Utilities	229
OTHER BUSINESS EXP	1,687
<b>Total</b>	<b>739,274</b>

**Form 1120-C, Schedule G, Line 9a, Column (a),  
Patronage NOL Deduction**

(Keep for your records)

**2019**

Name(s) as shown on return

Tax ID Number

**AMERIWAY CORPORATION****81-4134438**

Year	Loss Carryover/ Carryback	Increase of NOL Due to Sec 170(d)(2)(B) Contribution Reduction*	Loss Applied to 2019	Unused Loss	Unused Sec 170(d)(2)(B)
1999				Expiring this year	Expiring this year
2000					
2001					
2002					
2003					
2004					
2005					
2006					
2007					
2008					
2009					
2010					
2011					
2012					
2013					
2014					
2015					
2016	99,079			99,079	
2017	85,678			85,678	
2018	83,454			83,454	
	<b>Current year NOL</b>		<b>Applied to Prior Years</b>	<b>Remaining 2019 NOL carryover</b>	
2019	79,369			79,369	
	<b>Future years NOL</b>		<b>Applied to 2019</b>		
Future Years					
<b>TOTALS</b>	<b>347,580</b>		<b>0</b>	<b>347,580</b>	<b>0</b>

\* A corporation having a net operating loss (NOL) carryover from any taxable year must apply the special rule of §170(d)(2)(B). The rules are designed to prevent a double tax benefit through interaction of NOL and charitable contribution carryovers. The excess charitable deduction can reduce taxable income only once. Under these rules, a corporation's charitable contributions carryover (but not the NOL carryover) must be reduced, to the extent the charitable contribution deduction, in computing the taxable income of an intervening year, would increase the NOL to a succeeding year.

## Sara Sam CPA PC

2424 E York Street 301C  
Philadelphia, PA 19125  
sara@sarasamcpa.com  
Phone: (215)667-8839 | Fax: (215)695-2376

February 13, 2020

AMERIWAY CORPORATION  
2424 E YORK ST, STE 223  
Philadelphia, PA 19125

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- \* Interviews regarding your **tax** situation
- \* Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other **tax**-related data
- \* **Tax**-related documents you provide that are required for processing **tax** returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (215)667-8839.

Sincerely,

Sara Sam  
Sara Sam CPA PC



**1120 TAX RETURN COMPARISON**  
**2017 / 2018 / 2019**

**2019**

Name(s) as shown on return  
**AMERIWAY CORPORATION**

Identifying number  
**81-4134438**

	2017 FEDERAL	2018 FEDERAL	2019 FEDERAL	DIFFERENCE BETWEEN 2018 & 2019
Net receipts . . . . .	579,722	848,839	659,905	(188,934)
Cost of goods sold . . . . .				
Gross profit . . . . .	579,722	848,839	659,905	(188,934)
Dividends . . . . .				
Interest . . . . .				
Gross rents . . . . .				
Gross royalties . . . . .				
Capital gain net income . . . . .				
Net gain/loss from 4797 . . . . .				
Other income . . . . .				
<b>Total income . . . . .</b>	<b>579,722</b>	<b>848,839</b>	<b>659,905</b>	<b>(188,934)</b>
Compensation of officers . . . . .				
Salaries and wages . . . . .				
Repairs and maintenance . . . . .				
Bad debts . . . . .				
Rents . . . . .				
Taxes and licenses . . . . .				
Interest . . . . .				
Charitable contributions . . . . .				
Depreciation . . . . .				
Depletion . . . . .				
Advertising . . . . .				
Pension, profit-sharing . . . . .				
Employee benefits . . . . .				
Domestic production activities ded . . . . .				
Other deductions . . . . .	665,400	932,293	739,274	(193,019)
<b>Total deductions . . . . .</b>	<b>665,400</b>	<b>932,293</b>	<b>739,274</b>	<b>(193,019)</b>
NOL deduction . . . . .				
Special deductions . . . . .				
<b>Taxable income . . . . .</b>	<b>(85,678)</b>	<b>(83,454)</b>	<b>(79,369)</b>	<b>4,085</b>
<b>Total tax . . . . .</b>				
Estimated taxes paid . . . . .				
Total payments line 33 . . . . .				
<b>Amount owed . . . . .</b>				
<b>Overpayment . . . . .</b>				
Applied to estimate . . . . .				
Refund . . . . .				
<b>RESIDENT STATE . . . . .</b>	<b>PA</b>	<b>PA</b>	<b>PA</b>	
<b>Taxable . . . . .</b>	<b>(85,678)</b>	<b>(83,454)</b>	<b>(79,369)</b>	<b>4,085</b>
<b>Tax . . . . .</b>				
Overpayment . . . . .				
Balance Due . . . . .				
	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>DIFFERENCE</b>



1010019117

DEPARTMENT USE ONLY

RCT-101 08-19 PAGE 1 OF 4

## PA CORPORATE NET INCOME TAX REPORT 2019

IRS Filing Type A = 1120 B = 1120S C = Other A

## STEP A

Tax Year Beginning 01012019 Tax Year Ending 12312019

## STEP B

Amended Report	N	52-53 Week Filer	N	First Report	N	File Period Change	N
Federal Extension Granted	N	Address Change	N	KOZ/EIP/SDA Credit	N	S Corp Taxable Built-in Gains	N
		Change Fed Group	N	Royalty/Related Interest	N	Section 381/382/Merger	N
				Add-Back (Act 52 of 2013)		NOLs/Alternate Apportionment	

## STEP C

Revenue ID	0000000000	Parent Corporation EIN	
Federal EIN	814134438		
Business Activity Code	488990		
Corporation Name	AMERIWAY CORPORATION		
Address Line 1	SUITE 223		
Address Line 2	2424 E YORK ST		
City	PHILADELPHIA	Province	
State	PA	Country Code	
ZIP	19125	Foreign Postal Code	

## STEP D: PA CORPORATE NET INCOME TAX

USE WHOLE DOLLARS ONLY

A. Tax Liability  
from Page 2  
(can not be less than zero)

B. Estimated  
Payments &  
Credits on Deposit

C. Restricted  
Credits

STEP E:  
Payment Due/Overpayment  
Calculation: A minus B minus C  
See instructions.

CNI	0	0	0	0
-----	---	---	---	---

## STEP F: Transfer/Refund Method (See instructions.)

E-File Opt Out (See instructions.) N

- ☐ **Transfer:** Amount to be credited to the next tax year after offsetting all unpaid liabilities.
- ☐ **Refund:** Amount to be refunded after offsetting all unpaid liabilities.

## STEP G: Corporate Officer (Must sign affirmation below)

NAME XIYAN ZHANG  
PHONE 2153958756  
EMAIL XZHANG@STRATUMLAW.COM

FORM 1024  
BARCODE 0000

I affirm under penalties prescribed by law, this report, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete report. If this report is an amended report, the taxpayer hereby consents to the extension of the assessment period for this tax year to one year from the date of filing of this amended report or three years from the filing of the original report, whichever period last expires, and agrees to retain all required records pertaining to that tax and tax period until the end of the extended assessment period, regardless of any statutory provision providing for a shorter period of retention. For purposes of this extension, an original report filed before the due date is deemed filed on the due date. I am authorized to execute this consent to the extension of the assessment period.

Corporate Officer Signature  
XIYAN ZHANG

Date  
02132020

HIGHLY CONFIDENTIAL - ATTORNEY'S EYES ONLY

AMERIWAY - 0077609



1010019217

REVENUE ID 0000000000  
**TAX YEAR END** 12312019 **NAME** AMERIWAY CORPORATION  
**RCT-101** 08-19 **PAGE 2 OF 4** **PA CORPORATE NET INCOME TAX REPORT 2019**

**SECTION A: BONUS DEPRECIATION**

USE WHOLE DOLLARS ONLY

(Include REV-1834, Schedule C-8 and C-9, if claiming bonus depreciation.)

1. Current year federal depreciation of 168k prop.	1	0
2. Current year adjustment for disposition of 168k prop.	2	0
3. Other adjustments.	3	0

**SECTION B: PA CORPORATE NET INCOME TAX**

1. Income or loss from federal return on a separate-company basis.	1	-79369
--	---	--------

**2. DEDUCTIONS:**

2A. Corporate dividends received (from REV-798, Schedule C-2, Line 7).	2A	0
2B. Interest on U.S. securities (GROSS INTEREST minus EXPENSES).	2B	0
2C. Current yr. addtl. PA deprec. plus adjust. for sale (REV-1834, Sched. C-8, Line 8).	2C	0
2D. Other (from REV-860, Schedule OD) See instructions.	2D	0
<b>TOTAL DEDUCTIONS</b> - Add Lines 2A through 2D and enter the result on Line 2.	2	0

**3. ADDITIONS:**

3A. Taxes imposed on or measured by net income (from REV-860, Schedule C-5, Line 6).	3A	0
3B. Employment incentive payment credit adjustment (Include Schedule W).	3B	0
3C. Current year bonus depreciation (from REV-1834, Sched. C-8, Line 3).	3C	0
3D. Intangible expense or related interest expense (REV-802, Sched. C-6, Line 11; must include REV-802).	3D	0
3E. Other (from REV-860, Schedule OA) See instructions.	3E	0
<b>TOTAL ADDITIONS</b> - Add Lines 3A through 3E and enter the result on Line 3.	3	0

4. Income or loss with Pennsylvania adjustments (Line 1 minus Line 2 plus Line 3).	4	-79369
5. Total nonbusiness income or loss (from REV-934, Column C, Total; must include REV-934).	5	0
6. Income or loss to be apportioned (Line 4 minus Line 5).	6	-79369
7. Apportionment (from Schedule C-1, 1C, or 2C if using Special Apportionment).	7	1.000000
8. Income or loss apportioned to PA (Line 6 times Line 7).	8	-79369
9. Nonbusiness income or loss allocated to PA (from REV-934, Column A, Total; must include REV-934).	9	0
10. PA taxable income or loss after apportionment (Line 8 plus Line 9).	10	-79369
11. Total net operating loss deduction (from RCT-103, Part A, Line 4).	11	0
12. PA taxable income or loss (Line 10 minus Line 11).	12	-79369
13. PA corporate net income tax (Line 12 times 0.0999). If Line 12 is less than zero, enter "0".	13	0
14. Less: Credit for tax paid by affiliate(s) for intangible expense or related interest expense (from REV-803, Sched. C-7, Line 9; must include REV-803).	14	0
15. Tax Due (Line 13 minus Line 14.)	15	0

**SCHEDULE C-1: Apportionment Schedule For Corporate Net Income Tax (Include RCT-106.) \*****Sales Factor**

Sales - PA	1A	659905	1C	1.000000
Sales - Total	1B	659905		

**Special Apportionment**

Numerator	2A	0
Denominator	2B	0
Apportionment	2C	0
Proportion		

\* Refer to REV-1200, PA Corporate Net Income Tax Instructions, found at www.revenue.pa.gov.



1010019217

HIGHLY CONFIDENTIAL - ATTORNEY'S EYES ONLY

1010019217  
AMERIWAY - 0077610



1010019317

REVENUE ID 0000000000  
**TAX YEAR END** 12312019 **NAME** AMERIWAY CORPORATION  
**RCT-101** 08-19 **PAGE 3 OF 4** **PA CORPORATE NET INCOME TAX REPORT 2019**

**SECTION C: CORPORATE STATUS CHANGES****Final Report****PA Corporations:**

Did you ever transact business anywhere?

N

If yes, enter date all business activity ceased

Did you hold assets anywhere?

N

If yes, enter date of final disposition of assets\*

N

**Foreign Corporations:**

Did you ever transact business in PA on your own or through an unincorporated entity?

N

If yes, enter date PA business activity ceased

Did you hold assets in PA on your own or through an unincorporated entity?

N

If yes, enter date of final disposition of  
PA assets\*

\*Schedule of Disposition of Assets, REV-861, must be completed and filed with this report.

Has the corporation sold or transferred in bulk, 51 percent or more of any class of assets? (See instructions.)

N

If yes, enter the following information. (Include a separate schedule if additional space is needed.)

Purchaser Name

Address Line 1

Address Line 2

City

State

ZIP

Province

Country Code

Foreign Postal Code

**SECTION D: GENERAL INFORMATION QUESTIONNAIRE**

Describe corporate activity in PA

**LOGISTICS**

Describe corporate activity outside PA

Other states in which taxpayer has activity

State of Incorporation

PA

Incorporation Date

10142016

1. Does any corporation, individual or other business entity hold all or a majority of the stock of this corporation?
2. Does this corporation own all or a majority of stock in other corporations? If yes, include REV-798, Schedule X.
3. Is this taxpayer a partnership or other unincorporated entity that elects to file federal taxes as a corporation?
4. Has the federal government changed taxable income as originally reported for any prior period for which reports of change have not been filed in PA?

1  
2  
3  
4N  
N  
N  
N

If yes: First Period End Date:

Last Period End Date:

Accounting Method - Federal Tax Return

Accounting Method - Financial Statements

C

A = Accrual

C = Cash

O = Other

C

A = Accrual

C = Cash

O = Other

Other

Other



1010019317

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1010019317  
AMERIWAY - 0077611

1010019417

REVENUE ID 0000000000  
**TAX YEAR END** 12312019 **NAME** AMERIWAY CORPORATION  
**RCT-101** 08-19 **PAGE 4 OF 4** **PA CORPORATE NET INCOME TAX REPORT 2019**  
**SCHEDULE OF REAL PROPERTY IN PA** (Include a separate schedule if additional space is needed.)  
 Did you own or rent property in PA titled to the corporation or any Single Member LLC during this filing period? **N**  
 If yes, the below section must be completed.

O = Own

R = Rent

Street Address

City

County

K0Z/K0EZ

**CORPORATE OFFICERS**

(See instructions.)

SSN

Last Name

First Name

MI

Must provide requested information  
 for all filled officer positions.

President/Managing Partner

Vice President

Secretary

Treasurer/Tax Manager

**PREPARER'S INFORMATION**

Firm Federal EIN

471500758

Firm Name

SARA SAM CPA PC

Address Line 1

2424 E YORK STREET 301C

Address Line 2

City

PHILADELPHIA

Province

State

PA

Country Code

ZIP

19125

Foreign Postal Code

I affirm under penalties prescribed by law, this report, including any accompanying schedules and statements, has been prepared by me and to the best of my knowledge and belief is a true, correct and complete report.

**Tax Preparer's Signature****Date**

02132020

**INDIVIDUAL PREPARER****PHONE**

SARA SAM

2156678839

**EMAIL**

SARA@SARASAMCPA.COM

**PTIN/SSN**

P01602029



1010019417

HIGHLY CONFIDENTIAL - ATTORNEY'S EYES ONLY

1010019417  
AMERIWAY - 0077612

**pennsylvania**  
DEPARTMENT OF REVENUE

**REV-860** (CT) 04-18  
**C-5 SCHEDULE OF TAXES**

**TAX YEAR BEGINNING** 01-01-2019

**CORPORATION NAME** AMERIWAY CORPORATION **REVENUE ID** 0000000000 **TAX YEAR ENDING** 12-31-2019

1. PA Corporate Net Income Tax		
2. Philadelphia Business Income and Receipts Tax (BIRT) - Net Income Portion		
3. Income Taxes - Other States		
4. Local Income Taxes		
5. Other Income Taxes		
6. Total Income Taxes (Add Lines 1 through 5) Carry to RCT-101, Page 2, Line 3A		
7. PA Capital Stock/Foreign Franchise Tax (Not applicable for tax years beginning on or after Jan. 1, 2016)		
8. Philadelphia Business Income and Receipts Tax (BIRT) - Gross Receipts Portion	792	
9. Payroll Taxes		
10. Real Estate Taxes		
11. Sales and Use Tax		
12. Business Privilege Tax - Other than Income		
13. Occupancy Tax		
14. Local Taxes - Not Based on Income		
15. Other Taxes - Not Based on Income		
16. Total Taxes Not Imposed on or Measured by Income (Add Lines 7 through 15)		792
17. Total tax Expense Reported on Federal Income Tax Return (Add Lines 6 and 16)		792

**Schedule OA - Other Additions**

Description	Amount
Tax Preference Items	
<b>Total</b> Carry to RCT-101, Section B, Line 3-E	

**Schedule OD - Other Deductions**

Description	Amount
Federal Wages Disallowed as a Result of Tax Credits Under IRC Sec 45B or IRC Sec 51	
<b>Total</b> Carry to RCT-101, Section B, Line 2-D	





REV-1834 (CT) 08-18

## SCHEDULE C-8

## ADJUSTMENT FOR BONUS DEPRECIATION

TAX YEAR  
BEGINNING 01-01-2019

CORPORATION NAME AMERIWAY CORPORATION REVENUE ID 0000000000

TAX YEAR  
ENDING 12-31-2019

This Schedule is required to be completed annually and submitted with the RCT-101

1. Unused Bonus Depreciation Balance from prior year: .....
- 1A. Unrecovered Bonus Depreciation Balance: .....   
On Qualified Property Acquired in Transactions Where Asset Basis is Carried Over  
Date of Transaction: \_\_\_\_\_ Type of Transaction: \_\_\_\_\_  
Revenue ID of Corporation from Whom Assets Acquired: \_\_\_\_\_ FEIN: \_\_\_\_\_
2. Amount of Federal Bonus Depreciation claimed in this tax year:
  - 2A. Property placed in service prior to Sept. 28, 2017 .....
  - 2B. Property placed in service on or after Sept. 28, 2017 .....
3. Current Year Bonus Deprec. Addition (Line 2A plus 2B)  
TOTAL (Carry to Line 3C, Page 2, of RCT-101) .....
4. Additional PA Bonus Depreciation Deduction:
  - 4A. Property placed in service prior to Sept. 28, 2017 (MACRS x 3/7) .....
  - 4B. Property placed in service on or after Sept. 28, 2017 (MACRS w/o regard to Bonus) . .
5. PA Bonus Depreciation Deduction  
TOTAL (Line 4A plus 4B) .....
6. Deduction for Property Which is Fully Depreciated, Sold or Otherwise Disposed:
  - 6A. Property placed in service prior to Sept. 28, 2017 (Schedule C-9 Line 2) .....
  - 6B. Property placed in service on or after Sept. 28, 2017 (Schedule C-9 Line 4) .....
7. PA Deduction for Property Which is Fully Depreciated, Sold or Otherwise Disposed:  
TOTAL (Line 6A plus 6B) .....
8. PA Bonus Depreciation Deduction (Line 5 plus 7)  
TOTAL (Carry to line 2C, Page 2, of RCT-101) .....
9. Remaining Unused Bonus Depreciation Balance Carry-Forward:  
TOTAL (Line 1 plus Line 1A plus Line 3 minus Line 8) .....


**2019 BIRT-EZ**  
 DUE DATE: APRIL 15, 2020

**CITY OF PHILADELPHIA  
DEPARTMENT OF REVENUE  
2019 BUSINESS INCOME & RECEIPTS TAX**  
For business conducted 100% in Philadelphia

 AMERIWAY CORPORATION  
 2424 E YORK ST  
 PHILADELPHIA, PA 19125

 City Account Number  
 3253796

EIN 814134438

SSN

 Taxpayer E-mail Address  
 XZHANG@STRATUMLAW.COM

If this is a change of address, file a Change Form and check this box:

If your business terminated in 2019, enter the termination date AND file a CHANGE FORM.


**YOU MUST COMPLETE WORKSHEET "S-EZ"**

If this is an amended return place an "X" here:

**COMPUTATION OF TAX DUE OR OVERPAYMENT**

1. NET INCOME PORTION OF TAX (from Page 2, Line 6). If there is no tax due, enter "0" . . . . .	1.	0
2. GROSS RECEIPTS PORTION OF TAX (from Page 2, Line 11). If there is no tax due, enter "0" . . . . .	2.	792
3. Tax Due for the 2019 Business Income & Receipts Tax (Line 1 plus Line 2). . . . .	3.	792
4. MANDATORY 2020 BIRT Estimated Payment (See Instructions) . . . . .	4.	792
5. Total Due by 4/15/2020 (Line 3 plus Line 4) . . . . .	5.	1584

**ESTIMATED PAYMENTS AND OTHER CREDITS**

6a. Include any estimated and/or extension payments of 2019 BIRT previously made and any credit from overpayment of the 2018 BIRT and/or 2019 NPT return . . . . .	6a.	1060
6b. Credit from Special Credit Schedule (SC). (Cannot exceed amount on Line 3) . . . . .	6b.	
6c. Total payments and credits. (Line 6a plus Line 6b) . . . . .	6c.	1060
7. Net Tax Due (Line 5 less Line 6c). If Line 6c is greater than Line 5, enter "0" . . . . .	7.	524
8. Interest and Penalty Refer to web site for current percentage . . . . .	8.	
9. TOTAL DUE including Interest and Penalty (Line 7 plus Line 8). Use payment coupon. Make check payable to: "City of Philadelphia" . . . . .	9.	524

**OVERPAYMENT OPTIONS** If Line 6C is greater than Line 5, enter the amount to be:

10a. Refunded. Do not file a separate Refund Petition . . . . .	10a.	
10b. Applied to the 2019 Net Profits Tax Return . . . . .	10b.	
10c. Applied to the 2020 Business Income & Receipts Tax . . . . .	10c.	

Under penalties of perjury, as set forth in 18 PA C.S. §§ 4902-4903 as amended, I swear that I have reviewed this return and accompanying statements and schedules, and to the best of my knowledge and belief, they are true and complete.

 Taxpayer Signature \_\_\_\_\_ Date 02-13-2020 Phone # 215-395-8756

 Preparer Signature \_\_\_\_\_ Date 02-13-2020 Phone # 215-667-8839




**2019 BIRT-EZ****TAX COMPUTATION SCHEDULES**

City Account Number

3253796

If business is operated inside and outside of Philadelphia, you **must** file the BIRT Regular return available at [www.phila.gov/revenue](http://www.phila.gov/revenue).Reminder - You **must** use the same method (METHOD I or METHOD II) that you elected on the first Business Income & Receipts **Tax** return filed.**NET INCOME PORTION**

Place "X" in box to indicate a loss.

1. **METHOD II.** Net Income (or loss) as properly reported to the Federal Government . . . . . 1. ☒ 79369
- OR**
2. **METHOD I.** Net Income (or loss) in accordance with Accounting System . . . . . 2.
3. **Statutory Net Income Deduction from Worksheet S-EZ, Line S5, below** . . . . . 3.
4. Loss Carry Forward, if any . . . . . 4.
5. **Taxable** Income or loss. (Amount on Line 1 OR Line 2 minus Line 3 minus Line 4) . . . . . 5. ☒ 79369
6. **TAX DUE** (Line 5 X .0625). If Line 5 is a loss, enter zero here and on Page 1, Line 1 . . . . . 6.

**GROSS RECEIPTS PORTION**

Do not report negative numbers for gross receipts.

**TAXABLE GROSS RECEIPTS from:**

- 7a. Sales and/or rentals of tangible personal property . . . . . 7a.
- 7b. Services . . . . . 7b. 659905
- 7c. Rentals of real property . . . . . 7c.
- 7d. Royalties . . . . . 7d.
- 7e. Gains on sales of capital business assets . . . . . 7e.
- 7f. Gains on sales of stocks, bonds, etc. (Not applicable to individuals.) . . . . . 7f.
- 7g. Dividends. (Not applicable to individuals.) . . . . . 7g.
- 7h. Interest. (Not applicable to individuals.) . . . . . 7h.
- 7i. Other. (Describe) . . . . . 7i.
8. **TAXABLE GROSS RECEIPTS** before Statutory Exclusion. (Add Lines 7a through 7i.) . . . . . 8. 659905
9. **Statutory Exclusion (Lower of Line 8 or \$100,000.00)** . . . . . 9. 100000
10. Net **taxable** Gross Receipts (Line 8 minus Line 9) . . . . . 10. 559905
11. **TAX DUE.** (Line 10 X .001415). Enter here and on Page 1, Line 2 . . . . . 11. 792

**Worksheet S-EZ - Use to calculate Statutory Net Income Deduction**

- S1. Enter the lower of Line 8 above or \$100,000.00 . . . . . S1. 100000
- S2. Enter Net Income from Line 1 or Line 2. If loss, enter zero . . . . . S2.
- S3. Enter **Taxable** Gross Receipts from Line 8 above . . . . . S3. 659905
- S4. Divide Line S2 by Line S3. (Cannot be greater than 1.0000) . . . . . S4.
- S5. Statutory Net Income Deduction (Line S1 times Line S4. Cannot exceed \$100,000) . . . . . S5.
- Enter here and on Line 3, above.**



**2020 BIRT & MANDATORY EST. PAY Estimate Instructions**  
**AMERIWAY CORPORATION**

**Filing method:**

Your estimate voucher will not be e-filed. Sign and date your check. Then mail the voucher and check on or before the due date of the estimate to the address listed below.

**Due date:**

04-15-2020

**Payment:**

\$524.00

**Payment methods:**

Make check payable to the "City of Philadelphia". Payment of **tax** MUST be made using the preprinted coupons and postage paid envelope provided to existing **tax** payers. Payment of BPT includes **tax** (net of prepayments/credits) AND mandatory estimate.

**Address to file:**

City of Philadelphia  
Department of Revenue  
PO Box 1393  
Philadelphia, PA 19105-1393

## Taxpayer records

Amount paid: \_\_\_\_\_  
Check number: \_\_\_\_\_  
Date mailed: \_\_\_\_\_

Detach here

**2019 BIRT and MANDATORY ESTIMATED 2020 BIRT  
PAYMENT COUPON**

**Due Date: April 15, 2020**

**TAXPAYER NAME**  
and ADDRESS

AMERIWAY CORPORATION  
2424 E YORK ST STE 223  
Philadelphia, PA 19125

**Tax Due** 524

CITY ACCOUNT #: 3253796

### Interest & Penalty

<b>Total Due</b>	<b>524</b>
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**Make check payable to: "City of Philadelphia"**  
**Include your Account Number on your check or money order.**

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